

State of California

ABC-281

10/99

Department of Alcoholic Beverage Control

License Type: 34 One Day Beer & Wine  
License Nontransferable

LICENSE NO. 9547081

Receipt No. 2532122

Fee Paid \$50.00

Geographical Code 1933

**APPLICATION:**

Pursuant to the authority granted by the organization named below, the undersigned hereby applies for the above designated license(s) for the location also described below.

ORGANIZATION: HOLLYWOOD FOREVER INC-ENDOWMENT CARE & MEMORIAL CARE  
LOCATION ADDRESS: 5970 SANTA MONICA BLVD  
LOS ANGELES, CA 90038

TYPE OF EVENT: OTHER EVENT

HR/DATES DURING WHICH  
ALCOHOL WILL BE SOLD:  
October 11, 2018  
7PM-11PM

ESTIMATED ATTENDANCE: 150

AUTHORIZED REPRESENTATIVE / ADDRESS

JAY BOILEAU

5970 SANTA MONICA BLVD  
LOS ANGELES, CA 90038

**LICENSE:**

The above-named organization is hereby licensed, pursuant to Section 24045.1 of the Business and Professions Code and Rule 59.5 of the California Code of Regulations, to engage in the temporary sale of alcoholic beverages for consumption at the above-named location for the period authorized below. This license does not include off-sale ("to-go") privileges. This license may be revoked summarily by the Department if, in the opinion of the Department and/or the local law enforcement agency, it is necessary to protect the safety, welfare, health, peace, and morals of the people of the State.

Good for 1 day(s). Date Issued October 9, 2018.

Director of Alcoholic Beverage Control

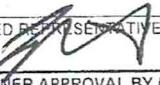
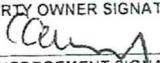
By \_\_\_\_\_



**DAILY LICENSE APPLICATION/AUTHORIZATION - Non Transferable**

*Instructions: Complete all items. Submit to local ABC District Office with required fee (Cashier's Check or Money Order) payable to ABC. Once license is issued, fee cannot be refunded. For a listing of ABC District Offices please visit <http://www.abc.ca.gov/distmap.html>*

*Pursuant to the authority granted by the organization named below, the undersigned hereby applies for the license(s) described below.*

1. ORGANIZATION'S NAME Hollywood Forever Inc. - Endowment Care & Memorial Care		CONDITIONS REQUIRED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	GEO CODE 9547081
2. LICENSE TYPE (Check appropriate license type AND organization type)			
a. <input checked="" type="checkbox"/> Daily General (\$25.00) <i>(Includes beer, wine and distilled spirits)</i>		<input type="checkbox"/> Political Party/Affiliate Supporting Candidate for Public Office or Ballot Measure <input checked="" type="checkbox"/> Organization Formed for Specific Charitable or Civic Purpose <input type="checkbox"/> Other: _____	
		<input type="checkbox"/> Fraternal Organization in Existence Over Five Years with Regular Membership <input type="checkbox"/> Religious Organization <input type="checkbox"/> Vessel per Section 24045.10 B&P (\$50.00)	
NUMBER OF DISPENSING POINTS 1			
b. <input type="checkbox"/> Special Daily Beer (\$25.00)		<input checked="" type="checkbox"/> Special Daily Beer & Wine (\$50.00) <input type="checkbox"/> Charitable <input type="checkbox"/> Fraternal <input type="checkbox"/> Social <input type="checkbox"/> Political <input type="checkbox"/> Other: _____ <input type="checkbox"/> Civic <input type="checkbox"/> Religious <input type="checkbox"/> Cultural <input type="checkbox"/> Amateur Sports Organization	
NUMBER OF DISPENSING POINTS 1			
c. <input type="checkbox"/> Special Temporary License (\$100.00) <i>(Different privileges depending on statute)</i>		<input type="checkbox"/> Television Station per Section 24045.2 or 24045.9 B&P <input type="checkbox"/> Nonprofit Corporation per Sections 24045.4 and 24045.6 B&P <input type="checkbox"/> Other Special Temporary Licenses, per Section _____	
License number _____		Amount \$ _____	
3. EVENT TYPE <input type="checkbox"/> Dinner <input type="checkbox"/> Dance <input type="checkbox"/> Wedding <input type="checkbox"/> Lunch <input type="checkbox"/> Picnic <input type="checkbox"/> Barbeque <input type="checkbox"/> Social Gathering <input type="checkbox"/> Festival <input type="checkbox"/> Sports Event <input type="checkbox"/> Concert <input type="checkbox"/> Birthday <input type="checkbox"/> Mixer <input type="checkbox"/> Carnival <input type="checkbox"/> Dinner Dance <input checked="" type="checkbox"/> Other: Story Telling and Journalism			
4. TOTAL # OF DAYS 1		5. ESTIMATED ATTENDANCE 150	
6. HOURS OF ALCOHOLIC BEVERAGE SALES, SERVICE AND/OR CONSUMPTION From 7pm To 11pm		7. EVENT DATE(S) Thursday 10.11.2018	
8. EVENT IS OPEN TO THE PUBLIC <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		9. EVENT LOCATION (Give facility name, if any, street number and name, and city) The Masonic Lodge - 5970 Santa Monica Blvd, Los Angeles, CA 90038	
10. LOCATION IS WITHIN THE CITY LIMITS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		11. TYPE OF ENTERTAINMENT Authors Literature Reading and Conversation	
12. SECURITY GUARDS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		13. AUTHORIZED REPRESENTATIVE'S NAME Jay Boileau	
14. REPRESENTATIVE'S TELEPHONE NUMBER [REDACTED]		15. REPRESENTATIVE'S ADDRESS 6000 Santa Monica Blvd, Los Angeles, CA 90038	
16. ORGANIZATION'S MAILING ADDRESS (If different from #15 above)		17. AUTHORIZED REPRESENTATIVE'S SIGNATURE 	
18. DATE SIGNED 10.01.2018		PROPERTY OWNER APPROVAL BY (Name), REQUIRED Yogu Kanthiah	
PHONE NUMBER [REDACTED]		PROPERTY OWNER SIGNATURE 	
DATE SIGNED 10.01.2018		LAW ENFORCEMENT APPROVAL BY (Name), IF APPLICABLE C. TIERPEZ 38231	
PHONE NUMBER [REDACTED]		LAW ENFORCEMENT SIGNATURE 	
DATE SIGNED 10/03/2018		ABC EMPLOYEE SIGNATURE [REDACTED]	
DISTRICT OFFICE APPROVAL BY (Name)		ISSUANCE DATE 10/03/2018	

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